

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) Declaration <table border="0"> <tr> <td>Submitted with Initial Filing</td> <td>Submitted after Initial Filing</td> </tr> </table>		Submitted with Initial Filing	Submitted after Initial Filing	Attorney Dkt. No.	
Submitted with Initial Filing	Submitted after Initial Filing				
First Named Inventor					
COMPLETE IF KNOWN					
Application No.					
Filing Date	Herewith				
Group Art Unit					
Examiner Name					

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:
Minibrain homologous proteins involved in the regulation of energy homeostasis
the specification of which was filed on 3 September 2003 as PCT International Application Number PCT/EP03/09774 and was amended on _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
02 019 747.1	Europe	September/03/2002		No
				No
				No

We hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

I hereby appoint the registered practitioner(s) associated with Customer No. **6449** to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith. Direct all correspondence to Customer Number **6449**.

I hereby declare that all statements made herein of our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <u>Karsten</u> (first and middle [if any])		Family Name <u>Eulenberg</u> or Surname	
Inventor's Signature <u>[Signature]</u>		Date <u>13.12.2004</u>	
Residence: City <u>37120-Bovenden</u>	State	Country <u>Germany</u>	Citizenship <u>German</u>
Mailing Address : <u>Vom-Stein-Straße 29, 37120 Bovenden, Germany</u>			
Mailing Address			
City	State	Zip	Country

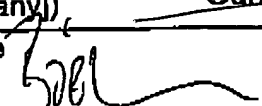
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <u>Günter</u> (first and middle [if any])		Family Name <u>Brönner</u> or Surname	
Inventor's Signature		Date	
Residence: City <u>37077 Göttingen</u>	State	Country <u>Germany</u>	Citizenship <u>German</u>
Mailing Address <u>Springstraße 54, 37077 Göttingen, Germany</u>			
Mailing Address			
City	State	Zip	Country <u>Germany</u>

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NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name Karsten (first and middle [if any])		Family Name Eulenberg or Surname	
Inventor's Signature		Date	
Residence: City 37120 Bovenden	State	Country Germany	Citizenship Germ
Mailing Address : Vom-Stein-Straße 29, 37120 Bovenden, Germany			
Mailing Address			
City	State	Zip	Country

NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <u>Günter</u>		Family Name or Surname <u>Brönnner</u>	
Inventor's Signature 		Date <u>14.12.04</u>	
Residence: City 37077 Göttingen <u>44797 Bochum</u>	State	Country Germany	Citizenship Germ
Mailing Address <u>Im Haarmannsbusch 43, 44797 Bochum, Germany</u> Springstraße 54, 37077 Göttingen, Germany			
Mailing Address <u>Im Haarmannsbusch 43, 44797 Bochum</u>			
City <u>44797 Bochum</u>	State	Zip	Country Germany